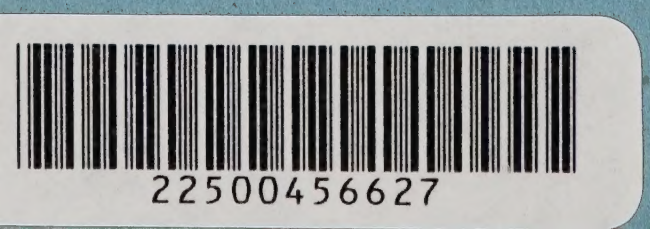
A Doctor Speaks to Seamen

N.C. 119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A Doctor Speaks to Seamen

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A DOCTOR SPEAKS TO SEAMEN.

THE HEALTH OF THE SEAFARER.

Health is of great importance to every man but is especially so to the seafarer. His work is often arduous, with much strain and stress, and requires him to be in good physical condition. He has not the same chance of getting medical advice, if he does fall ill, as if he were on shore. The treatment necessary may be difficult or impossible to get on board ship. It is vital, therefore, that he should take care of his health in every possible way.

This pamphlet deals with one of the risks of the health of seafarers, that of the venereal diseases.

Syphilis and Gonorrhoea (Pox and Clap) are very common in all large seaports. The only certain protection against these diseases is to avoid exposure to the risk of catching them. Women—prostitutes or amateurs—who go with different men may have one or the other, or, even, both of the diseases. In foreign countries there is sometimes a system of regulation; certain houses, or brothels, are set aside for the use of prostitutes, and the women in these houses are subject to what is called medical inspection. It is quite a mistake to imagine there is less risk of getting the diseases by going to these houses. The inspection of such women is necessarily unsatisfactory from a medical point of view. It cannot be sufficiently frequent or thorough and it does not prevent venereal disease. It is apt to give a sense of security which is false and dangerous.

Careful examination of the women in these houses has been made in several parts of the world in order to find out the extent to which they were infected. During the War the American Government took the matter in hand, and, as the result of the examinations made and the other evidence brought before them, they abolished their " Red Light " districts.

Some figures which have been published will show the position:—

> "Out of 446 prostitutes tested in a Reformatory, only 50 were free from all venereal diseases; 89 out of 100 were diseased."
>
> "In one port, of 114 women examined by the health authorities, 73 out of 100 were infected."
>
> "In a Central American port there were 231 registered prostitutes in the segregated district, 175 registered prostitutes outside the district, and 302 clandestines who were unregistered; 91 per cent. of those in the district were found to have syphilis or gonorrhoea, or both; 95 per cent. of those registered outside the district, and 98·5 per cent. of the clandestines, were similarly found infected."

So clear has it become that licensed brothels increase instead of preventing venereal disease that many countries have now abolished the system and others are likely to follow soon. In the British Empire, Ceylon and Malaya and Hong Kong have abolished licensed houses.

The people who own these houses run them for their own profit. They have very active ways of advertising the houses. Very often bum-boatmen, pedlars, washerwomen and other persons coming out from the shore to the ships bring cards giving the addresses of these houses. Sometimes private notes of invitation are written to seamen. Such notes are only advertisements, and it is certain that houses to which strangers are invited in this way are those in which they are most likely to catch disease. In the Eastern ports, a great many of the rickshaw coolies are employed by the brothel-keepers to bring custom. British seamen taking any rickshaw on the quay and giving no particular direction to the coolie will probably find themselves taken direct to a brothel, probably one of the worst and most highly infected in the town.

Remember that each coolie taking a customer gets paid by the brothel-keeper for doing so.

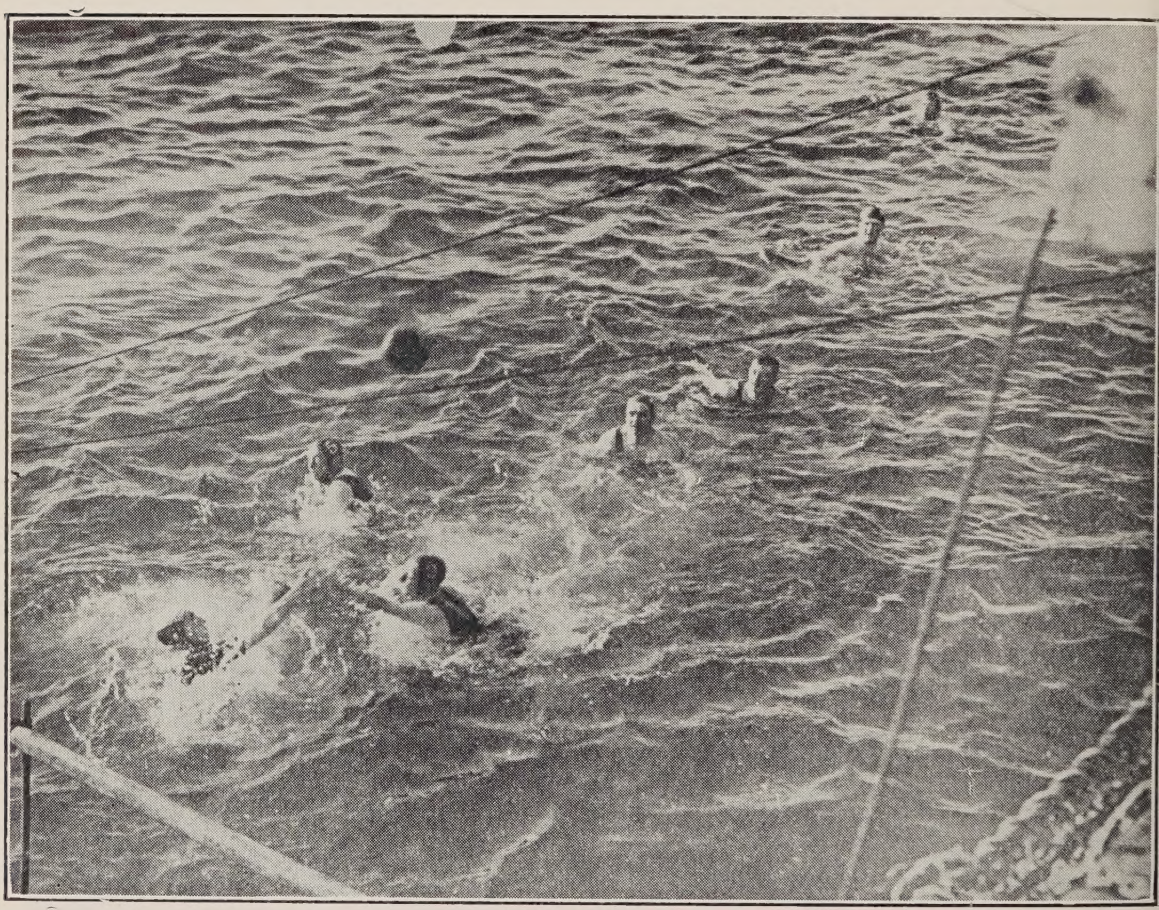
Prostitutes are not the only women who pass on disease. Many foolish girls who are willing to oblige men are heavily infected, and, often, they are unaware themselves of how dangerous they are. Some unscrupulous man has infected them in the first instance, and if they remain untreated (as many of them do) they are a danger to all who follow him. A girl who gives her favours freely will sooner or later become infected, and will pass on disease to any man who has intimate relations with her.

Seafarers who visit brothels, or, otherwise, go with prostitutes or " amateurs " are therefore in great

"Playing the Game".

danger of contracting either one or both of the venereal diseases, and it should be borne in mind that the man who contracts either of these diseases—if married—runs the risk of communicating it to his wife and family on his return home.

Self-control ashore can be made easier by developing interests of the mind when on board. Commercial enterprise makes many foreigners press obscene literature, post cards and picture papers on the seamen. A corrective to this, and one which will give a far greater interest, is the promotion of good libraries on board ship. This matter is receiving the attention of the

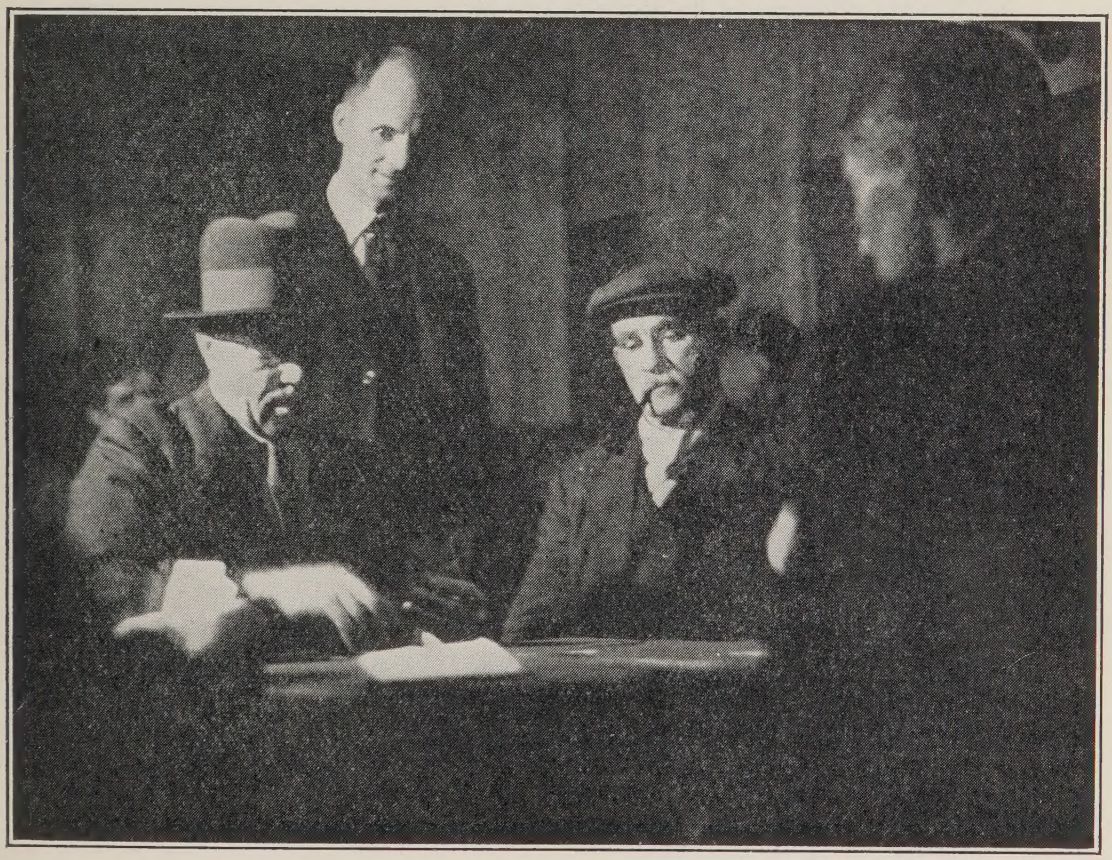


"Health and Sport"

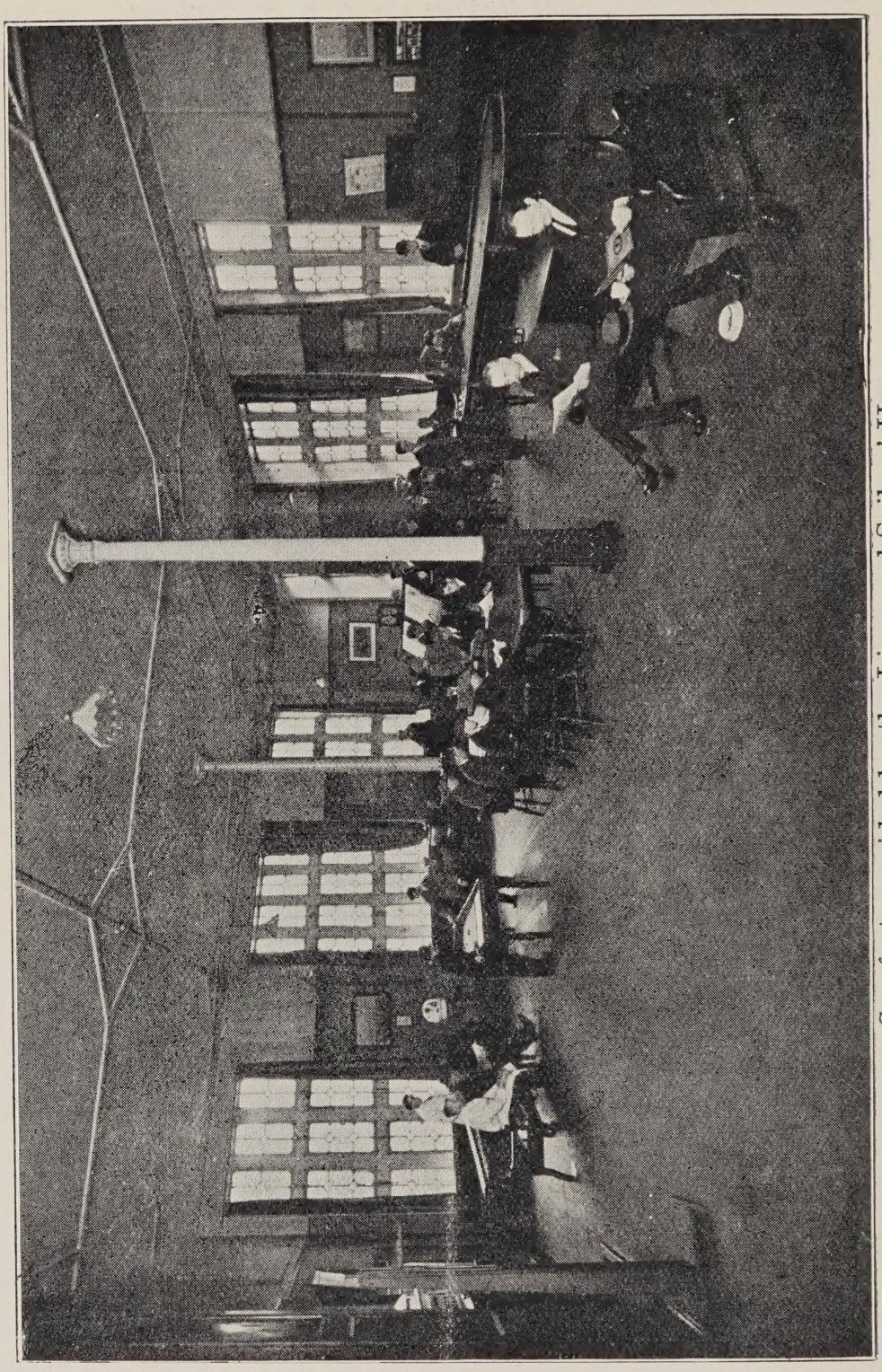
Seafarers' Education Service, whose governing body comprises representatives of all sections of the Mercantile Marine. It is recognised that there is a real need to make interesting reading matter available for the seafarer.

In many home and overseas British ports, special arrangements are now made to provide decent shore

accommodation, and various sports and games are run by British residents in the Colonies for men of the Mercantile Marine. Port Welfare Committees in London, Liverpool and Cardiff have recently been set up. India, also, has these Committees in Calcutta and Bombay. These Committees are concerned with the provision of good shore sleeping accommodation, with directing visiting seamen to places of interest and of healthy entertainment, and with recreational facilities of a decent and cheerful kind. Other home and Empire ports are likely to follow their example. Seamen will also agree that they should encourage amongst themselves the desire to use decent shore accommodation in preference to the less desirable resorts.



Home from home in an establishment of the
British Sailors' Society



Comfort provided by the Liverpool Sailors' Home.

What are these diseases?

Two principal diseases are included under the heading "venereal," namely, syphilis and gonorrhoea. These are two entirely distinct diseases running quite different courses, though a person may have both at

the same time. There is a third venereal disease, "chancroid" or "soft sore," not of such great importance since its effects are entirely local. Syphilis may be:—(1) acquired; (2) hereditary or congenital.

Acquired Syphilis.

How it is caught.

(*a*) Direct, by the germs of the disease being implanted on some part of the body of a healthy person by actual contact with a person already infected, usually during sexual intercourse. This part is, therefore, usually the genital organs, but it may also be the lips or throat or some other part (doctors are occasionally infected in the hands while examining syphilitic patients).

(*b*) Indirect, through the medium of cups, mugs, towels, pipes, shaving brushes, etc., which, having been used by an infected person, are then used by a healthy one before being sterilised: this method of contagion is, however, comparatively infrequent, and, once the infected person is under regular treatment, very unlikely.

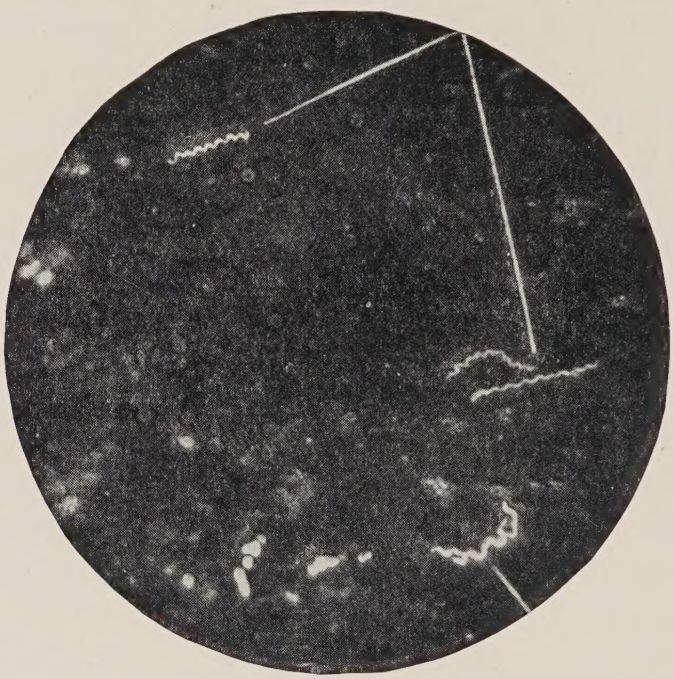
The time elapsing between the contact and infection and the first appearance of the disease varies from ten days to six or seven weeks, or even longer.

The first stage is characterised by a sore (chancre) at the site of infection. Its appearance varies in different cases and according to its position on the body, but it should be pointed out that there is no relation between the severity of the chancre and the gravity of the later stages. Fatal complications may follow a chancre so apparently mild as to seem hardly worth notice. On the other hand, an angry-looking and alarming chancre may sometimes be cured without any troublesome sequel at all.

The second stage usually occurs from six to nine weeks or more after the first stage. Its most striking features are a rash on the body, which may be slight or profuse, and sore patches in various places, particularly in the throat and on the lips. It is important

to realise that these sores are infectious in the highest degree, and it is particularly in this stage that patients are liable to spread the disease by " indirect contact " through the medium of drinking vessels, etc., as indicated above. This stage may sometimes be so slight as to be unrecognised.

ILLUSTRATION OF GERMS OF SYPHILIS.



"The cause of Syphilis (Pox)".

(Cork-screw like germ, highly magnified).

From "The Diagnosis and treatment of Venereal Diseases", by David Lees, by kind permission of Messrs. E. & S. Livingstone, Publishers, Edinburgh.

The third stage occurs in cases where treatment in the early stages has been neglected or insufficient. It may develop almost any time after infection, from one to twenty or thirty years, or even more. In this stage any organ of the body may be attacked—none is immune. Very frequently ulcers develop on the skin, formed by the breaking down of tumours (gumma); in other cases the bones are eaten away (necrosis), very severe and repellent deformities resulting; for instance, the nose or other parts of the face may be eaten away, holes may be formed in the roof of the mouth, and the heart and large blood-vessels may be

attacked. But it is particularly the Heart and large Blood-Vessels and the Nervous System—the brain and spinal cord—which are so susceptible to this poison. Various forms of Blindness, Epilepsy and Paralysis have their origin in syphilis, while General Paralysis of the Insane, one of the commonest and most fatal forms of insanity, is wholly due to this poison. A considerable proportion of the male admissions to the lunatic asylums of large cities of Great Britain are cases of General Paralysis of the Insane due to syphilis. Similarly, Locomotor Ataxy, a very common disease of the nervous system, and one of the most distressing afflictions that the doctor is ever called upon to deal with, is invariably due to an earlier infection with syphilis.

Congenital or Transmitted Syphilis.

Effect of Syphilis on Family.

Congenital or transmitted Syphilis is due to infection of the unborn child owing to the mother or father having syphilis. This form of the disease often prevents a living child being born at all and is responsible for the early death or life-long affliction of many thousands of children. A person who has had syphilis and marries before being fully treated and completely cured runs great danger of seeing the disease appear in his children with deafness, blindness, or other serious results.

Gonorrhoea.

How it is Caught.

(*a*) direct, by sexual connection with an infected person;

(*b*) indirect, by contact with infected towels, beddings, etc. (this is very uncommon in adults, but accounts for some of the cases in small children, especially girls).

The disease shows itself from one to ten days (usually three or four) after contact and infection.

Symptoms.—The first symptoms are usually slight irritation or itching at the end of the water-pipe, with

a little more redness than usual, and a slight stickiness of the lips of the water-pipe. If skilled treatment is not started at once, a discharge of matter from the water-pipe follows, and often smarting or pain on passing water.

If promptly and efficiently treated, the disease may be cured in a week or two, but, in most cases, it lasts longer, from three weeks to several months. If treatment is neglected it may become " chronic." In this stage there is usually no pain, and the discharge becomes scanty, intermittent, and clear instead of " mattery." This slight discharge is known as " gleet " and may be important. So long as even a trace of infection is present, the disease is not cured, but is still communicable to others, is liable to relapse and to develop various complications.

Complications.—These are numerous, and only a few of the commonest can be mentioned here:

(*a*) Inflammation of the Testicles; one or both of these organs may become very swollen and painful; in many cases their function may be permanently destroyed, so that this complication is a frequent cause of sterility in males.

(*b*) Inflammation of the Prostate Gland (a gland situated at the neck of the bladder), which often leads to abscess formation.

(*c*) Stricture, or narrowing of the urethra (water pipe), so that the passing of water becomes difficult and painful. It is a serious condition, causing secondary diseases of the bladder, and in some cases even of the kidneys. It usually requires a surgical operation for its treatment.

(*d*) Inflammation of the Bladder (Cystitis).

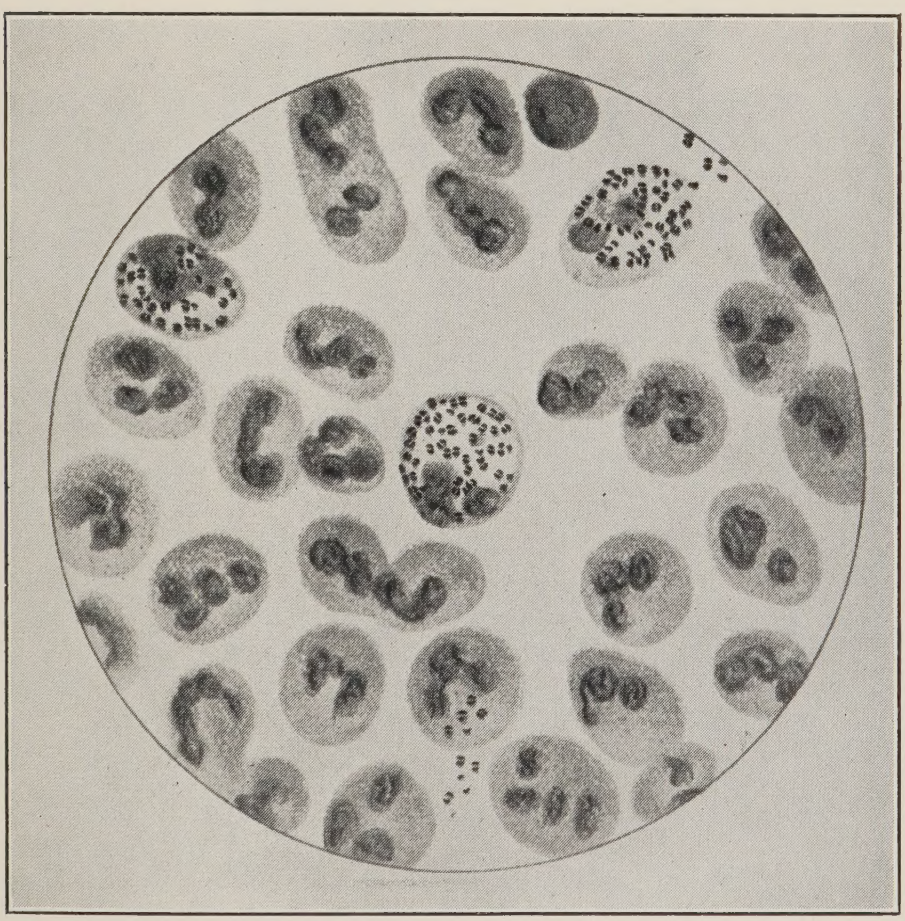
(*e*) Gonorrhoeal Arthritis or Rheumatism—a severe inflammation of one or more joints caused by the infection being deposited in them by the blood stream. There is in such cases, severe pain, and the limb may be left permanently stiff, the patient remaining more or less crippled according to the importance of the joints involved.

(*f*) Gonorrhoeal Ophthalmia, or inflammation of the eye, is caused by some of the infectious discharge being introduced into the eye, either by a finger, or through the medium of a soiled towel, etc. This inflammation is very severe, and if not caught and treated promptly, may result in total destruction of the eye, so that, if both are affected, complete blindness is possible. It is obvious that a person suffering from gonorrhoea may spread this complication through the medium of handkerchiefs, towels, etc.

Possible Effects on Family.

(*a*) The Wife.—The woman infected by gonorrhoea from the husband is liable to serious and even fatal complications. If she escapes these dangers she may become sterile, that is, to lose the power of bearing children.

ILLUSTRATION GERM OF GONORRHŒA.



"The cause of Gonorrhœa".
(Small kidney-shaped germs in pairs, highly magnified.)
From Medical Research Council Special Report Series No. 19, by kind permission of the Controller of H.M. Stationery Office.

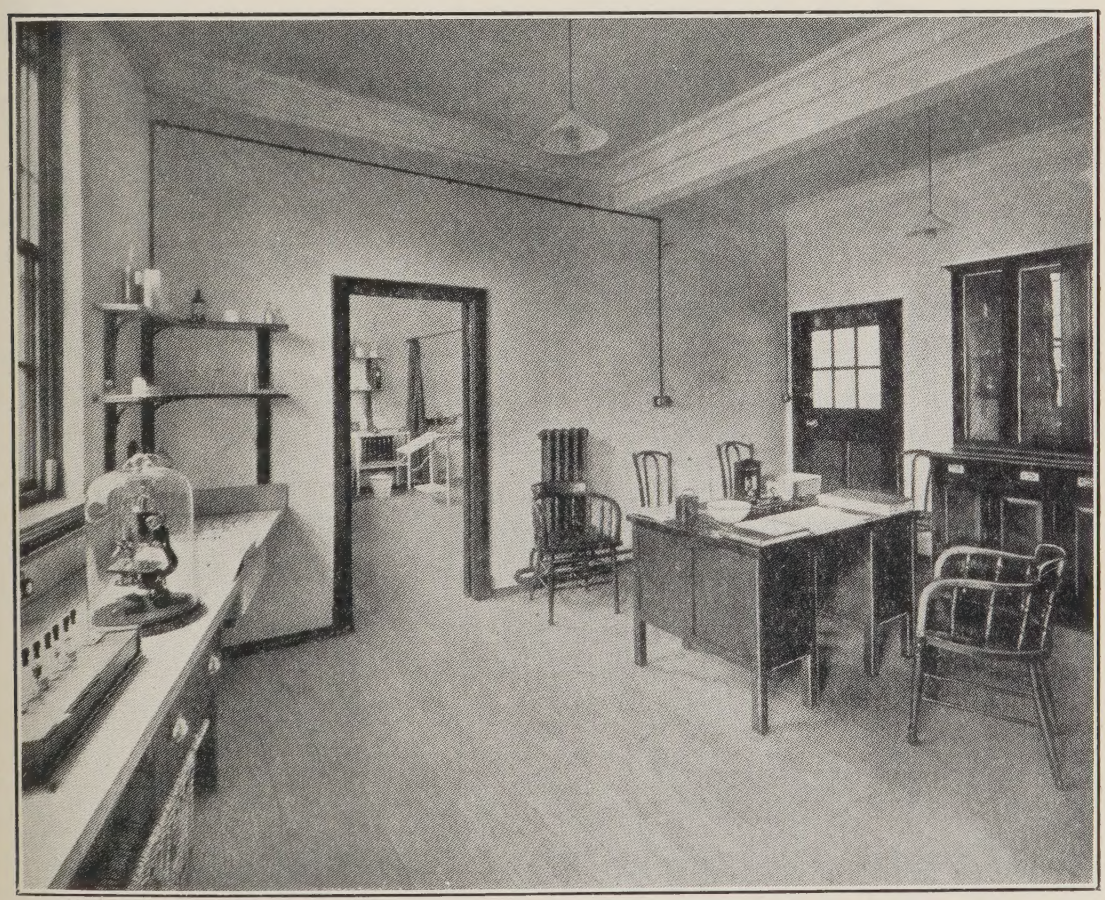
(*b*) The Children.—A child born to a woman suffering from gonorrhoea runs a grave risk during birth of receiving the infection in the eyes. The result is the development, a few days after birth, of an acute inflammation of the eyes (ophthalmia neonatorum), which is a very frequent source of complete blindness. *About* 25 *per cent. of all cases of blindness in children* in the past were attributable to this cause. These cases are, fortunately, less common now since a method of prevention has been devised of treating the child's eyes immediately after birth so that the disease germs are destroyed. Where this is not done, however, or is not properly done, blindness may result.

"Sins of the Fathers . . .".

These Diseases are Curable.

Although these diseases may lead to such serious consequences, it must be realised that both can be really cured provided that treatment is begun early

and is carried out thoroughly and conscientiously under proper medical supervision. Nearly all the dangers of these diseases are the result of neglect in getting proper treatment in the early stages, particularly of trying quack remedies. It must be clearly understood that the treatment of these diseases calls for skilled medical knowledge and that chemists or advertising quacks are not able to bring about a real cure. In the foreign ports especially, many who advertise themselves as specialists in venereal treatment are not qualified doctors and do not give proper treatment. Every British ship carries in its medicine chest the latest list of the treatment centres in foreign ports where seamen, under the international Brussels Agreement get free and skilled treatment. Where there is no centre or where there is difficulty, application for the name of a suitable doctor can be made to the British Consul.



"Seamen's Dispensary, Liverpool."

Under the treatment of quacks or of well-meaning amateurs the first stage of syphilis may clear up, as, indeed, it occasionally does, without any treatment at all, but this does not mean the disease is cured, and in such cases it is almost certain to break out again later on. The man who tries to cure himself, or who goes to anybody but a proper doctor, is likely to suffer in the long run by falling a victim to the dangerous complications described above. He will also in all probability remain contagious, and therefore run the risk of spreading the disease to other people, and particularly to his family on his return home. The danger of quacks and of other unqualified persons treating venereal diseases is such that in Britain a special Act of Parliament makes it a criminal offence for anyone even to advertise or offer to treat these conditions. Quacks take as much money as they can get, give some pills or a bottle of medicine which have no curative effect, and leave things as they were, with much precious time wasted. It is important to know, however, that the risk of infection is lessened from the moment proper treatment begins and that a man is rendered non-infective long before he is thoroughly cured.

The treatment of these diseases is best carried out by a doctor who has specialised in them. For this reason the safest course of all is for the sufferer to attend the special Treatment Centres or clinics which have been established in practically all seaport towns in this country and in many abroad. In all the British centres and in most of the foreign ones (by the Brussels Agreement, already mentioned) treatment is quite free, and is conducted by expert doctors. It need hardly be pointed out that the doctors at these clinics abroad are thoroughly trained and the seafarer need feel no hesitation in availing himself of their services. It is the tradition in the medical profession to do the best for the patient, whatever his rank, whatever his race.

In the case of the seaman there is a special point of importance with regard to treatment. It must be

realised that the complete cure of these conditions may take a long time, and the treatment begun at one port will probably be insufficient for a complete cure. In that case it is essential that the patient should continue his treatment at the next port of call, and for that purpose he must take special care to carry with him the card from the last Treatment Centre, in order to show the next doctor what treatment he has already received.

Whitechapel Clinic, London.

With regard to treatment on board ship, the position is as follows:—

When a ship's doctor is carried he will be prepared to give free treatment to the crew for these diseases. If, however, no doctor is carried, the captain will be provided with the drugs necessary for " first aid " in these diseases, and a certain amount of treatment between the seaports can be obtained for any patient who applies for the necessary medicines.

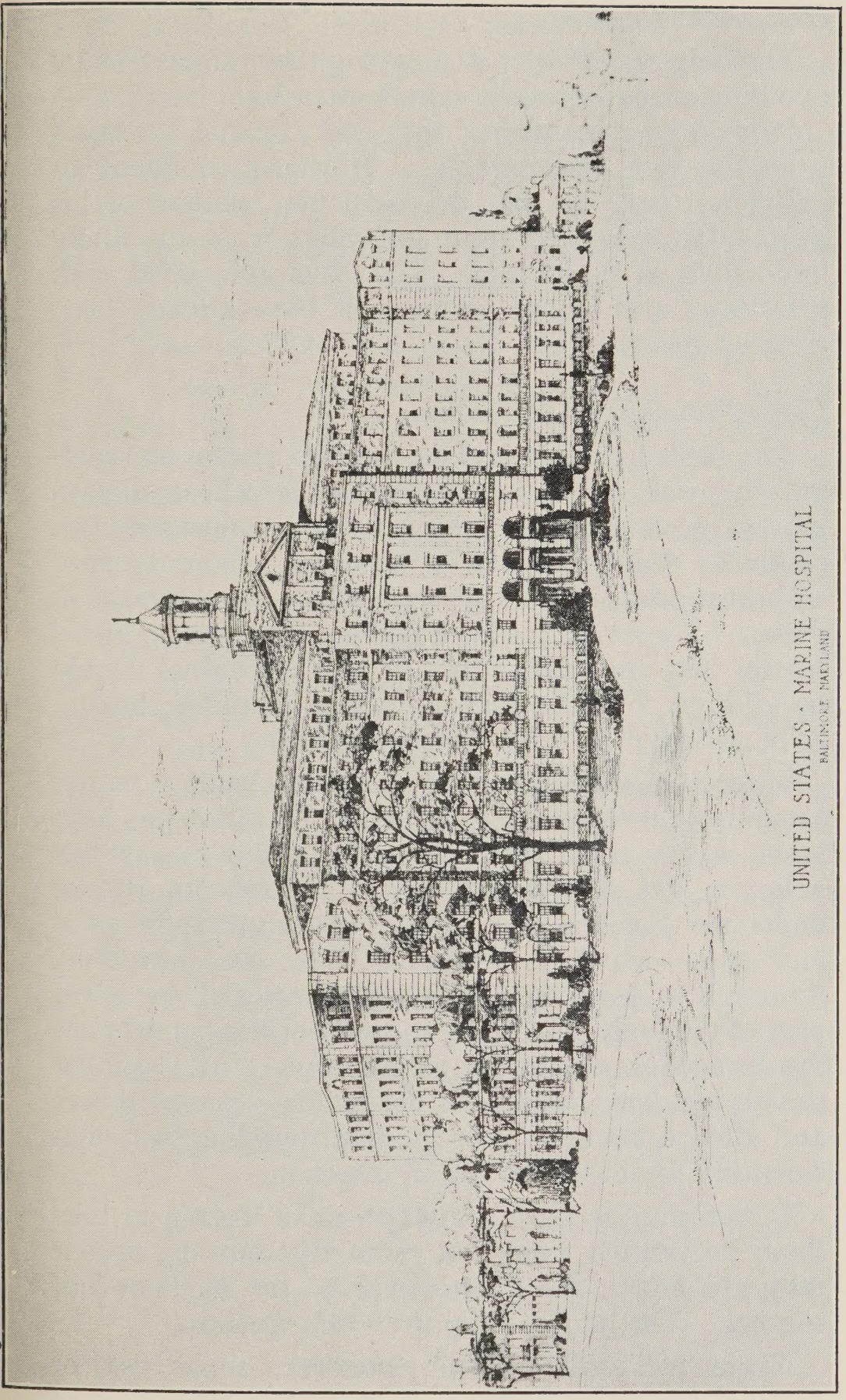
Seamen need not now be deterred from seeking treatment promptly, as the Merchant Shipping Act has been altered to include venereal diseases among those for which they are entitled to free treatment. There is now, also, a more sympathetic attitude by shipowners on this subject.

Finally, it must be clearly understood that in any case of venereal disease, treatment must be persevered with until the patient is definitely told by a proper doctor that he is cured, and that further treatment is unnecessary.

It may be mentioned that seafarers who are insured under the National Health Insurance Act are ordinarily entitled to receive Sickness and Disablement Benefit from their Approved Society whilst incapacitated from work through venereal disease in the United Kingdom.

Seafarers who may be landed abroad in hospital through venereal disease are not themselves entitled to receive sickness or disablement benefit. If, however, they have dependents in the United Kingdom, the dependents may receive the benefit during the seafarer's incapacity. In any such case notice of the incapacity should be sent to the man's Approved Society as soon as possible.

Seafarers should always obtain certificates, when incapacitated abroad, covering the period of the incapacity, for production to the Approved Society, and if and when sent home as distressed British seamen, should obtain a certificate or other suitable evidence of incapacity during the voyage home.



Marine Hospital, Baltimore, U.S.A.

How these Diseases may be Prevented.

The only certain way of escaping these diseases is by avoiding sexual relations outside marriage.

It must be remembered that every sexual act apart from this is a definite risk. However confident an individual may be that the particular woman of his acquaintance is free from infection, it is absolutely impossible to be certain. The risks associated with prostitutes and foolish young girls have already been referred to.

Early Preventive Treatment.

Emphasis has been laid on the importance of avoiding the risk of Venereal Disease which is always present when there is irregular and promiscuous sex conduct. Public Health is, however, also concerned with any possibility of preventing the development of disease after a risk has been taken. There is no moral reason why the misconduct of any individual should be allowed to make him a menace to public health, as he will be if he contracts such disease.

Successful self-disinfection is not so simple a matter as many of its advocates proclaim. If a risk has been taken, every effort should be made within one or two hours to get skilled disinfection carried out by, or under the direction of, a doctor, either privately, or at any clinic which is available. In the meantime, thorough washing with soap and water of all the lower part of the body (including the part of the penis below the fore-skin) should be carried out. If a rubber sheath has been used, and the hands cleansed before and after its removal, this thorough washing will considerably diminish the risk of infection.

Circumstances do not always make it easy to take these preventive measures promptly, but the sooner they are taken, the greater will be the likelihood of success. The germs " dig in " very quickly.

There will still remain, however, some risk of disease, whatever is done, if there has been contact

with an infected person, and seamen would be wise to be sceptical of those who profess to be able to indulge with perfect safety in a very dangerous game.

In some ports abroad an arrangement has been made by which special centres have been opened either at port clinics or at the docks, where early preventive treatment can be obtained. In all British and in many other clinics, early preventive treatment is available.

The Value of Education—Duty of Parents.

If, however, venereal diseases are really to be stamped out much more radical preventive measures must be taken. If the extent to which people expose themselves to the risk of infection is really to be reduced, we must educate young people to regard self-control as the true aim, and we must get rid of the fallacy that sexual intercourse is necessary to health.

Those of you who are fathers, will you do all that is in your power to bring up your children with a sound knowledge of the laws of health? A clean knowledge of the normal facts of life from early years, coupled with a high ideal of family life and a knowledge that immorality is unnecessary and harmful, will do much to make self-control easier for the next generation. Will you, therefore, support this line of teaching for your children?

If any reader desires more information on the subject of venereal diseases or sex education an enquiry should be directed to the Medical Secretary, British Social Hygiene Council, Carteret House, Carteret Street, London, S.W.1.

RECREATIONAL FACILITIES.

List of Honorary Secretaries.

Name of Port and Name of Individual or Organisation to whom application should be made.

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Antwerp.—W. R. B. Haynes, Esq., Antwerp Engineering Co., Ltd., 10, Rue des Indes.
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Huelva.—W. J. Ford, Esq., Curator, The Seamen's Institute

Name of Port and Name of Individual or Organisation to whom application should be made.

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The Secretary, Y.M.C.A.
Kiel.—The Manager, Verein Kieler Seemannsheim, e.v., Wall 10.
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Rouen.—Rev. W. Field, c/o The British Seamen's Institute, 1, Rue Francois Arago.
San Juan (Porto Rico).—The Secretary, Y.M.C.A.
St. Thomas V.I.—British Consulate.
Salonica.—British Consul-General.
Santander.—British Vice-Consulate.
Shanghai.—Rev. T. W. Hall, M.A., Missions to Seamen, 171, Broadway.
Singapore.—Rev. G. G. Elliott, Missions to Seamen, The Sailors' Institute, Anson Road.

Name of Port and Name of Individual or Organisation to whom application should be made.

Sydney (N.S.W.).—Rev. Alfred L. Wright, Chaplain, Rawson Institute for Seamen, 100, George Street North.

Tacoma.—Rev. Harry Ferneyhough, Seamen's Church Institute, Municipal Dock.

Tangier.—J. J. Berutich, Esq., c/o Messrs. Moses Parinte, Bankers.

Taranto.—Harold Vickers, Esq., Taranto Tramway Company, Ltd.

Trois Rivières.—Thomas Jones, Esq., 24, Ferland Street.

Trondhjem.—Mr. Erling M. Hjort, P.O. Box 248, Trondhjem.

Trouville.—Mons. Drumare, Agent to Lloyds, Courtier Maritime.

Tunis.—S. Borg, Esq., Melita Sports Society, 11, Rue de Grece.

Valencia.—G. Lemmon, Esq., Sailor's Institute, Paseo de Cara, A. 14.

Valletta.—Mons. Ercole Valenzia, Secretary to the National Union of Seamen, 7, Lascaris Wharf, Valletta.

Valparaiso.—Rev. Thomas Hardy, Chaplain and Secretary, Missions to Seamen, Calle Blanco.

Venice.—H. Waltuck, Esq., Seamen's Institute, Fondamenta, S. Simeone Piccolo 553.

Victoria (B. Columbia).—Connaught Seamen's Institute, Superior St.

Y.M.C.A., Corner Blanshard and View Streets.

Villagarcia.—British Vice-Consulate.

Wellington (New Zealand).—Rev. J. Moore, The Sailors' Friend Society Institute, Whitmore Street, Wellington.

Yokohama.—Secretary in Charge, Yokohama Seamen's Club, 194, Yamashita-Cho, Naka-ku.

Addresses of Port Welfare Secretaries.

London.—The Secretary, London Port Welfare Advisory Council, Carteret House, Carteret Street, London, S.W.1.

Liverpool.—Rev. G. W. Evans, A.K.C., Hon. Sec. Port of Liverpool Welfare Advisory Council, 1, Hanover Street, Liverpool.

Cardiff.—Aubrey Jenkins, Esq., Hon. Sec., Cardiff Port Welfare Committee, 31-32 Frederick Street, Cardiff.

Swansea.—Joint Hon. Secretaries, Rev. H. A. King, L.Th., H. L. Thomas, Esq., Swansea Port Welfare Committee, The Missions to Seamen, New-Cut Bridge, Swansea.

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